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	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery Second Se
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	Carter F. Davenport, Asst Warden Easterling Correctional Facility 200 Wallace Drive Clio, AL 36017	3 Type
		4. Restricted Delivery? (Extra Fee) ☐ Yes

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